

SAMPLE 3

IG - Industrial/Business Pool - Private, Conventional

New Application

Transmitter Site with One Area of Operation

Transmitter Site with Two Areas of Operation

Land Mobile Control Station Meeting 6.1 Meter Rule

1) Radio Service Code: IG	1a) Existing Radio Service Code:
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Application Purpose (Select only one) (NE)

2) NE - New MD - Modification AM - Amendment	RO - Renewal Only RM - Renewal/Modification CA - Cancellation of License	CO - Consolidate Call Signs WD - Withdrawal of Application DU - Duplicate License	NT - Required Notifications EX - Requests for Extension of Time AU - Administrative Update
3a) If this request is for a Developmental License , Demonstration License , or a Special Temporary Authorization (STA) , enter the code and attach the required exhibit as described in the instructions. Otherwise enter N (Not Applicable).			(N) D M S N/A
3b) If this request is for Special Temporary Authority due to an emergency situation, enter 'Y'; otherwise enter 'N'. Refer to Rule 1.915 for an explanation of situations considered to be an emergency.			(N) Yes No
4) If this request is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.			File Number
5) If this request is for a Modification, Renewal Only, Renewal/Modification, Cancellation of License, Consolidate Call Signs, Duplicate License, or Administrative Update, enter the call sign of the existing FCC license.			Call Sign
6) If this request is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).			MM DD
7) Is this request "major" as defined in Section 1.929 of the Commission's Rules when read in conjunction with the applicable radio service rules found in Parts 22 and 90 of the Commission's Rules? (NOTE: This question only applies to certain site-specific applications. See the instructions for applicability and full text of Section 1.929).			(Y) Yes No
8a) Does this filing request a Waiver of the Commission's rules? If 'Yes', attach an exhibit providing rule numbers and explaining circumstances.			(N) Yes No
8b) If a feeable waiver request is attached, multiply the number of stations (call signs) times the number of rule sections and enter the result.			
8c) Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?			(N) Yes No
9) Are attachments being filed with this application?			(N) Yes No

Applicant Information

10a) Taxpayer Identification Number: 98-7654321	10b) SGIN: 000	10c) FCC Registration Number (FRN): 7890-3456-12
11) Applicant/Licensee is a(n): (G) <div style="display: flex; justify-content: space-between;"> <u>I</u>ndividual <u>C</u>orporation <u>U</u>nincorporated Association <u>L</u>imited Liability Corporation <u>T</u>rust <u>P</u>artnership <u>G</u>overnment Entity <u>C</u>onsortium <u>J</u>oint Venture </div>		
12) First Name (if individual):	MI:	Last Name: Suffix:
13) Entity Name (if other than individual): CATINAHAT PEOPLES UTILITY DISTRICT		
14) Name of Real Party in Interest of Applicant:	15) Taxpayer Identification Number:	

Applicant Information (continued)

16) Attention To: NANCY DIDITWRIGHT, MANAGER			
17) P.O. Box: 2121	And /Or	18) Street Address:	
19) City: CATINAHAT		20) State: OR	21) Zip: 96107-2442
22) Telephone Number: 551-331-5551		23) FAX: 551-331-5552	
24) E-Mail Address: nancy_diditwright@catinahat.gov			

Contact Information (If different from the applicant)

25) First Name: DOUG	MI: J.	Last Name: CANTDANCE	Suffix:
26) Entity Name: HELPUOUT LICENSING INC.			
27) P.O. Box: 1414	And /Or	28) Street Address:	
29) City: CURVE		30) State: OR	31) Zip: 97970
32) Telephone Number: 541-541-5411		33) FAX: 541-541-5412	
34) E-Mail Address: dcantdance@helpuout.com			

Regulatory Status

35) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply):	
(<input type="checkbox"/>) <u>C</u> ommon Carrier (<input type="checkbox"/>) <u>N</u> on-Common Carrier (<input checked="" type="checkbox"/>) <u>P</u> rivate, internal communications (<input type="checkbox"/>) <u>B</u> roadcast Services (<input type="checkbox"/>) <u>B</u> and <u>M</u> anager	

Type of Radio Service

36) This filing is for authorization to provide the following type(s) of radio service (enter all that apply):	
(<input type="checkbox"/>) <u>F</u> ixed (<input checked="" type="checkbox"/>) <u>M</u> obile (<input type="checkbox"/>) <u>R</u> adiolocation (<input type="checkbox"/>) <u>S</u> atellite (sound) (<input type="checkbox"/>) <u>B</u> roadcast Services	
37) Interconnected Service? (<input checked="" type="checkbox"/>) <u>N</u> <u>Y</u> es <u>N</u> o	

Fee Status

38) Is the applicant exempt from FCC application fees? (<input checked="" type="checkbox"/>) <u>Y</u> <u>Y</u> es <u>N</u> o	
39) Is the applicant exempt from FCC regulatory fees? (<input checked="" type="checkbox"/>) <u>Y</u> <u>Y</u> es <u>N</u> o	

Alien Ownership Questions (If any answer is Yes, attach exhibit explaining circumstances.)

40) Is the applicant a foreign government or the representative of any foreign government?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
41) Is the applicant an alien or the representative of an alien?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
42) Is the applicant a corporation organized under the laws of any foreign government?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
43) Is the applicant a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
44) Is the applicant directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>

Basic Qualification Questions (If any answer is Yes, attach exhibit explaining circumstances.)

45) Has the applicant or any party to this application or amendment had any FCC station authorization, license, or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, construction permit denied by the Commission?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
46) Has the applicant or any party to this application or amendment, or any party directly or indirectly controlling the applicant, ever been convicted of a felony by any state or federal court?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
47) Has any court finally adjudged the applicant or any party directly or indirectly controlling the applicant guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>
48) Is the applicant or any party directly or indirectly controlling the applicant, currently a party in any pending matter referred to in the preceding two items?	(<input type="checkbox"/>) <u>Yes</u> <input type="checkbox"/> <u>No</u>

49) Race, Ethnicity, and Gender of Applicant/Licensee (Optional):

Race:	American Indian or Alaska Native:	Asian:	Black or African-American:	Native Hawaiian or Other Pacific Islander:	White:
Ethnicity:	Hispanic or Latino:	Not Hispanic or Latino:			
Gender:	Female:	Male:			

General Certification Statements

1) The applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
2) The applicant certifies that grant of this application would not cause the applicant to be in violation of any pertinent cross-ownership, attribution, or spectrum cap rule.* *If the applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
3) The applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
4) The applicant certifies that neither the applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under Section 1.2002(c) of the rules, 47 CFR § 1.2002(c). See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
5) The applicant certifies that it either (1) has a current Form 602 on file with the Commission, (2) is filing an updated Form 602 simultaneously with this application, or (3) is not required to file Form 602 under the Commission's Rules.

Signature

50) Typed or Printed Name of Party Authorized to Sign

First Name: ARTHUR	MI: F.	Last Name: HUMPTY	Suffix:
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51) Title: **OPERATIONS SUPERVISOR**Signature: **(MUST BEAR AN ORIGINAL SIGNATURE IF MANUALLY FILED.)**52) Date: **4/3/00****Failure To Sign This Application May Result In Dismissal Of The Application And Forfeiture Of Any Fees Paid****WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, Section 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).**

Wireless Telecommunications Bureau Schedule for
Station Locations and Antenna Structures

Approved by OMB
3060 - 0798
See 601 Main Form Instructions
for public burden estimate

1) Action Requested: (A) <u>Add</u> <u>Mod</u> <u>Del</u>		2) Location Number: L1	
3) Location Description: FX		4) Area of Operation Code:	
		5) Location Name: OLD TANK	
6) FCC Antenna Structure Registration # or N/A N/A (FAA Notification not Required)			
7) Latitude (DD-MM-SS.S): 46-06-45		8) Longitude (DDD-MM-SS.S): 123-11-20	
NAD83 (N) <u>N</u> or <u>S</u>		NAD83 (W) <u>E</u> or <u>W</u>	
9) Street Address, Name of Landing Area, or Other Location Description: .6 MI NE OF 469 NEHALEM ST			
10) City: CATINAHAT		11) State: OR	
		12) County: COLUMBIA	
13) Elevation of Site AMSL (meters) ('a' in antenna structure example): 165		14) Overall Ht AGL Without Appurtenances (meters) ('b' in antenna structure example): 24	
		15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example): 24	
16) Support Structure Type: TOWER			
17) Location Number: (only for Area of Operation Code 'A')		18) Radius (km):	
		19) Airport Identifier:	
		20) Site Status:	
21) Maximum Latitude (DD-MM-SS.S): Use for rectangle only (Northwest corner)		22) Maximum Longitude (DDD-MM-SS.S): Use for rectangle only (Northwest corner)	
NAD83 () <u>N</u> or <u>S</u>		NAD83 () <u>E</u> or <u>W</u>	
23) Do you propose to operate in an area that requires frequency coordination with Canada? () <u>Yes</u> <u>No</u>			
24) Description: (only for Area of Operation Code 'O')			
25) Number of Units: <u> </u> Hand Held <u> </u> Mobile <u> </u> Temporary Fixed <u> </u> Aircraft <u> </u> Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If 'Yes', submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311. (N) <u>Yes</u> <u>No</u>			
27) If the proposed site is located in one of the quiet zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper authority was notified:			

Wireless Telecommunications Bureau Schedule for
Station Locations and Antenna Structures

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1) Action Requested: (A) <u>Add</u> <u>Mod</u> <u>Del</u>		2) Location Number: L2	
3) Location Description: MO		4) Area of Operation Code: A	5) Location Name: OLD TANK MO
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD-MM-SS.S): <div style="text-align: right; margin-right: 50px;">NAD83 () <u>N</u> or <u>S</u></div>		8) Longitude (DDD-MM-SS.S): <div style="text-align: right; margin-right: 50px;">NAD83 () <u>E</u> or <u>W</u></div>	
9) Street Address, Name of Landing Area, or Other Location Description:			
10) City:	11) State:	12) County:	
13) Elevation of Site AMSL (meters) ('a' in antenna structure example):	14) Overall Ht AGL Without Appurtenances (meters) ('b' in antenna structure example):	15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example):	
16) Support Structure Type:			
17) Location Number: (only for Area of Operation Code 'A') L1	18) Radius (km): 80.00	19) Airport Identifier:	20) Site Status:
21) Maximum Latitude (DD-MM-SS.S): Use for rectangle only (Northwest corner) <div style="text-align: right; margin-right: 50px;">NAD83 () <u>N</u> or <u>S</u></div>	22) Maximum Longitude (DDD-MM-SS.S): Use for rectangle only (Northwest corner) <div style="text-align: right; margin-right: 50px;">NAD83 () <u>E</u> or <u>W</u></div>		
23) Do you propose to operate in an area that requires frequency coordination with Canada? <div style="text-align: right;">(N) <u>Yes</u> No</div>			
24) Description: (only for Area of Operation Code 'O')			
25) Number of Units: <u> </u> Hand Held <u> </u> Mobile <u> </u> Temporary Fixed <u> </u> Aircraft <u> </u> Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If 'Yes', submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311. <div style="text-align: right;">(N) <u>Yes</u> No</div>			
27) If the proposed site is located in one of the quiet zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper authority was notified:			

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1) Action Requested: (A) <u>Add</u> <u>Mod</u> <u>Del</u>		2) Location Number: L3	
3) Location Description: FX		4) Area of Operation Code:	5) Location Name: NEW TANK
6) FCC Antenna Structure Registration # or N/A N/A (FAA Notification not Required)			
7) Latitude (DD-MM-SS.S): 46-11-57		NAD83 (N) <u>N</u> or <u>S</u>	8) Longitude (DDD-MM-SS.S): 122-58-01
NAD83 (W) <u>E</u> or <u>W</u>			
9) Street Address, Name of Landing Area, or Other Location Description: 5411 COLUMBIA HEIGHTS RD			
10) City: LONGGONE		11) State: OR	12) County: COWLITZ
13) Elevation of Site AMSL (meters) ('a' in antenna structure example): 287		14) Overall Ht AGL Without Appurtenances (meters) ('b' in antenna structure example): 18	15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example): 18
16) Support Structure Type: POLE			
17) Location Number: (only for Area of Operation Code 'A')		18) Radius (km):	19) Airport Identifier:
20) Site Status:			
21) Maximum Latitude (DD-MM-SS.S): Use for rectangle only (Northwest corner)		NAD83 () <u>N</u> or <u>S</u>	22) Maximum Longitude (DDD-MM-SS.S): Use for rectangle only (Northwest corner)
			NAD83 () <u>E</u> or <u>W</u>
23) Do you propose to operate in an area that requires frequency coordination with Canada? () <u>Yes</u> <u>No</u>			
24) Description: (only for Area of Operation Code 'O')			
25) Number of Units: <u> </u> Hand Held <u> </u> Mobile <u> </u> Temporary Fixed <u> </u> Aircraft <u> </u> Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. (N) <u>Yes</u> <u>No</u> If 'Yes', submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311.			
27) If the proposed site is located in one of the quiet zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper authority was notified:			

Wireless Telecommunications Bureau Schedule for
Station Locations and Antenna Structures

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3060 - 0798
See 601 Main Form Instructions
for public burden estimate

1) Action Requested: (A) <u>Add</u> <u>Mod</u> <u>Del</u>		2) Location Number: L4	
3) Location Description: MO		4) Area of Operation Code: A	5) Location Name:
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD-MM-SS.S): <div style="text-align: right;">NAD83 () <u>N</u> or <u>S</u></div>		8) Longitude (DDD-MM-SS.S): <div style="text-align: right;">NAD83 () <u>E</u> or <u>W</u></div>	
9) Street Address, Name of Landing Area, or Other Location Description:			
10) City:	11) State:	12) County:	
13) Elevation of Site AMSL (meters) ('a' in antenna structure example):	14) Overall Ht AGL Without Appurtenances (meters) ('b' in antenna structure example):	15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example):	
16) Support Structure Type:			
17) Location Number: (only for Area of Operation Code 'A') L3	18) Radius (km): 80.00	19) Airport Identifier:	20) Site Status:
21) Maximum Latitude (DD-MM-SS.S): Use for rectangle only (Northwest corner) <div style="text-align: right;">NAD83 () <u>N</u> or <u>S</u></div>	22) Maximum Longitude (DDD-MM-SS.S): Use for rectangle only (Northwest corner) <div style="text-align: right;">NAD83 () <u>E</u> or <u>W</u></div>		
23) Do you propose to operate in an area that requires frequency coordination with Canada? <div style="text-align: right;">(N) <u>Yes</u> <u>No</u></div>			
24) Description: (only for Area of Operation Code 'O')			
25) Number of Units: <u> </u> Hand Held <u> </u> Mobile <u> </u> Temporary Fixed <u> </u> Aircraft <u> </u> Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If 'Yes', submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311. <div style="text-align: right;">(N) <u>Yes</u> <u>No</u></div>			
27) If the proposed site is located in one of the quiet zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper authority was notified:			

Wireless Telecommunications Bureau Schedule for
Station Locations and Antenna Structures

Approved by OMB
3060 - 0798
See 601 Main Form Instructions
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1) Action Requested: (A) <u>Add</u> <u>Mod</u> <u>Del</u>		2) Location Number: L5	
3) Location Description: MO		4) Area of Operation Code: P	
5) Location Name:			
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD-MM-SS.S): 46-11-57		8) Longitude (DDD-MM-SS.S): 122-58-01	
NAD83 (N) <u>N</u> or <u>S</u>		NAD83 (W) <u>E</u> or <u>W</u>	
9) Street Address, Name of Landing Area, or Other Location Description:			
10) City: TRAIL CITY		11) State: OR	
12) County: COLUMBIA			
13) Elevation of Site AMSL (meters) ('a' in antenna structure example):		14) Overall Ht AGL Without Appurtenances (meters) ('b' in antenna structure example):	
15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example):			
16) Support Structure Type:			
17) Location Number: (only for Area of Operation Code 'A')		18) Radius (km): 100.00	
19) Airport Identifier:		20) Site Status:	
21) Maximum Latitude (DD-MM-SS.S): Use for rectangle only (Northwest corner)		22) Maximum Longitude (DDD-MM-SS.S): Use for rectangle only (Northwest corner)	
NAD83 () <u>N</u> or <u>S</u>		NAD83 () <u>E</u> or <u>W</u>	
23) Do you propose to operate in an area that requires frequency coordination with Canada? (N) <u>Yes</u> <u>No</u>			
24) Description: (only for Area of Operation Code 'O')			
25) Number of Units: <u> </u> Hand Held <u> </u> Mobile <u> </u> Temporary Fixed <u> </u> Aircraft <u> </u> Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If 'Yes', submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311. (N) <u>Yes</u> <u>No</u>			
27) If the proposed site is located in one of the quiet zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper authority was notified:			

Wireless Telecommunications Bureau Schedule for
Station Locations and Antenna Structures

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3060 - 0798
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1) Action Requested: (A) <u>Add</u> <u>Mod</u> <u>Del</u>		2) Location Number: L6	
3) Location Description: 6.1		4) Area of Operation Code: X	5) Location Name:
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD-MM-SS.S): <div style="text-align: right; margin-right: 50px;">NAD83 () <u>N</u> or <u>S</u></div>		8) Longitude (DDD-MM-SS.S): <div style="text-align: right; margin-right: 50px;">NAD83 () <u>E</u> or <u>W</u></div>	
9) Street Address, Name of Landing Area, or Other Location Description:			
10) City:		11) State: OR	12) County:
13) Elevation of Site AMSL (meters) ('a' in antenna structure example):		14) Overall Ht AGL Without Appurtenances (meters) ('b' in antenna structure example):	15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example):
16) Support Structure Type:			
17) Location Number: (only for Area of Operation Code 'A')	18) Radius (km):	19) Airport Identifier:	20) Site Status:
21) Maximum Latitude (DD-MM-SS.S): Use for rectangle only (Northwest corner) <div style="text-align: right; margin-right: 50px;">NAD83 () <u>N</u> or <u>S</u></div>		22) Maximum Longitude (DDD-MM-SS.S): Use for rectangle only (Northwest corner) <div style="text-align: right; margin-right: 50px;">NAD83 () <u>E</u> or <u>W</u></div>	
23) Do you propose to operate in an area that requires frequency coordination with Canada? <div style="text-align: right; margin-right: 50px;">(N) <u>Yes</u> <u>No</u></div>			
24) Description: (only for Area of Operation Code 'O')			
25) Number of Units: ___ Hand Held ___ Mobile ___ Temporary Fixed ___ Aircraft ___ Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If 'Yes', submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311. <div style="text-align: right; margin-right: 50px;">(N) <u>Yes</u> <u>No</u></div>			
27) If the proposed site is located in one of the quiet zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper authority was notified:			

Technical Data Schedule for the
Private Land Mobile and Land Mobile Broadcast Auxiliary
Radio Services (Parts 90 and 74)

Approved by OMB
3060 - 0798
See 601 Main Form instructions
for public burden estimate

Eligibility

1) Rule Section: 90.35a1	2) Describe Activity: PUBLIC UTILITY - COORDINATE ACTIVITIES.
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Frequency Coordinator Information (if not self-coordinated)

3) Frequency Coordination Number	4) Name of Frequency Coordinator	5) Telephone Number	6) Coordination Date
OR0UU00240	UTC	555-555-5555	4/17/00
7) Has this application been successfully coordinated? (Y) <u>Yes</u> / <u>No</u>			

Extended Implementation (Slow Growth)

8) Are you requesting a new or modified extended implementation plan? If 'Yes', attach an exhibit with a justification and a proposed station construction schedule.	(N) <u>Yes</u> / <u>No</u>
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Associated Call Signs (Attach additional sheets if required)

9)				

Broadcast Auxiliary Only

If there is an associated Parent Station, complete items 10-12.	10) Facility Id of Parent Station:	11) Radio Service of Parent Station:	12) City and State of Parent Station Principal Community:
13) If there is no associated parent station, this applicant is a: () <u>Broadcast Network Entity</u> <u>Television</u> <u>Cable Operator</u> <u>Motion Picture Producer</u> <u>Television Producer</u>			
			14) State of Primary Operation:

Control Point(s) (Other than at the transmitter) (Attach additional sheets if required)

15) Action A/M/D	16) Control Point Number	17) Location Street Address, City or Town, County, State	18) Telephone Number
A	C1	469 NEHALEM ST CATINAHAT COLUMBIA COUNTY OR	551-331-6661

Antenna Information

[illegible]

Frequency Information

28) Action: () A/M/D	29) Location Number:	30) Antenna Number:	31) Frequency (MHz)		32) Station Class	33) No. of Units	34) No. of Paging Receivers	35) Output Power (watts)	36) ERP (watts)	37) Emission Designators
A	L1	A1	Existing (if mod)	New 153.305	FB2	1		110	350	20K0F3E
A	L2		Existing (if mod)	New 153.305	MO	25		45		20K0F3E
A	L2		Existing (if mod)	New 159.630	MO	25		45		20K0F3E
A	L3	A1	Existing (if mod)	New 153.305	FB2	1		110	220	20K0F3E
A	L4		Existing (if mod)	New 153.305	MO	25		45		20K0F3E
A	L4		Existing (if mod)	New 159.630	MO	25		45		20K0F3E
A	L5		Existing (if mod)	New 153.305	MO	25		45		20K0F3E
A	L5		Existing (if mod)	New 159.630	MO	25		45		20K0F3E
A	L6		Existing (if mod)	New 159.630	FX1	1		25		20K0F3E
			Existing (if mod)	New						
			Existing (if mod)	New						
			Existing (if mod)	New						
			Existing (if mod)	New						
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